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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/740,233	12/19/2000	Kenneth F. Bugg	BELL-0063/00208	4489
75	90 07/31/2003			
Susan C. Murphy WOODCOCK WASHBURN KURTZ MACKIEWICZ & NORRIS LLP One Liberty Place - 46th Floor Philadelphia, PA 19103			EXAMINER	
			FIGUEROA, FELIX O	
			ART UNIT	PAPER NUMBER
1			2833	

DATE MAILED: 07/31/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

PTO-90C (Rev. 07-01)

Application No. Applicant(s) 09/740,233 BUGG, KENNETH F. Interview Summary Examiner Art Unit 2833 Felix O. Figueroa All participants (applicant, applicant's representative, PTO personnel): (1) Felix O. Figueroa. (4)_ . (2) J. G. Schaefer. Date of Interview: 23 July 2003. Type: a) ✓ Telephonic b) ✓ Video Conference c) Personal [copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: Claim(s) discussed: 1 and 9. Identification of prior art discussed: Prior art of record. Agreement with respect to the claims f) was reached. g) was not reached. h) \times N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: discussion on proposed amendment to overcome prior art of record. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required

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